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Alexandria, VA 22313,1450
on this 3 day of 7,2004.

SIPE Jan Hostos

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MAR 2 9 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent Applicant: Bemis et al.)	
Serial No.: 09/894,672)	
Filed: June 27, 2001)	Group Art Unit: 1731
For: Reinforcement Member For A Bu) shing)	Examiner: M. Halpern
Tip Plate And Related Method)	-
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Commissioner For Patents		

SUBMISSION OF SUPPLEMENTAL DECLARATION AND POWER OF ATTORNEY

Sir:

P. O. Box 1450

Alexandria, VA 22313-1450

In response to the acknowledgement of the Petition to Add Inventors, Paper No. 1003, dated November 6, 2003. Applicant submits herewith a supplemental declaration and power of attorney.

If any other fees are due in connection with the filing of this response, including any fee for a required extension of time under 37 CFR 1.136(a) for which Applicant hereby petitions, please charge all fees to Deposit Account No. 50-0568.

Respectfully submitted,

Stephen W. Barns

Registration No. 38,037

Date: 23 MAR 2004

Owens Corning
Patent Dept., Bldg. 11
2790 Columbus Road

2790 Columbus Road Granville, Ohio 43023

740-321-7162



PTO/SB/81 (10-00)

Approved for use through 10/31/2002, OMB 0651-0035
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/894,672
Filing Date	June 27, 2001
First Named Inventor	Bemis
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	24913A

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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Name Byron L. Bemis				
Signature	Jan 10 -			
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
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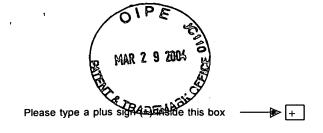


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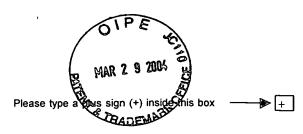


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Approved for use through 10/31/2002. OMB 0651-0035

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Name	David H. Wol	f				
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			nultiple			
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transa business in the United States Patent and Trademark Office connected therewith.	act all		
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I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
SIGNATURE of Applicant or Assignee of Record			
Name Jack L. Emerson			
Signature Kach Smerson			
Date 7-23-01			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
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SIGNATURE of Applicant or Assignee of Record				
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Signature	Ang F how			
	Date // JULY 3/, 700/			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
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Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name	William L. Streicher				
Signature	William L. Streeter				
Date					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN **APPLICATION DATA SHEET (37 CFR 1.76)**

As the below named inventor(s), I/we declare that:	24913A
This declaration is directed to:	
The attached application, or	
Application No. <u>09/894,672</u>	, filed on 27 June 2001,
as amended on	(if applicable);
I/we believe that I/we am/are the original and first invent which a patent is sought;	tor(s) of the subject matter which is claimed and for
I/ we have reviewed and understand the contents of the amended by any amendment specifically referred to about	above-identified application, including the claims, as ove;
I/we acknowledge the duty to disclose to the United Stato me/us to be material to patentability as defined in became available between the filing date of the prior adate of the continuation-in-part application, if applicable	n 37 CFR 1.56, including material information which application and the National or PCT International filing
All statements made herein of my/own knowledge are belief are believed to be true, and further that these statements and the like are punishable by fine or jeopardize the validity of the application or any patent is	statements were made with the knowledge that willful imprisonment, or both, under 18 U.S.C. 1001, and may
FULL NAME OF INVENTOR(S)	
Inventor one: Byron L. Bemis	
Signature:	Citizen of: US
Inventor two: Timothy A. Sullivan	
Signature: Justia. Juli	Citizen of: US
Inventor three: Kevin D. Smith	
Signature:	Citizen of: US
Inventor four: David H. Wolf	
Signature: Dain H. Wolf	Citizen of: US
Additional inventors are being named on	additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



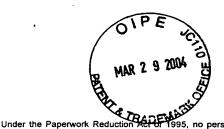
As the below named inventor(s), I/we declare that:

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	as amended on		(if applicable);		
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All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAME OF INVE	NTOR(S)				
Inventor one:	Byron L. Bemis				
Signature:		Citizen of:	Ůs		
Inventor two:	Timothy A. Sullivan				
Signature:		Citizen of:	US		
Inventor three:	Kevin D. Smith				
Signature:	- If I	Citizen of:	US		
Inventor four:	David H. Wolf				
Signature:		Citizen of:	US		
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This declaration is direc					
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	as amended on		(if applicable);		
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FULL NAME OF INVE	NTOR(S)				
Inventor one:	Jack L. Emerson				
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Inventor two:	Bruno A. Purnode				
Signature:		Citizen of: _	US		
Inventor three:	James P. Tracy				
Signature:		Citizen of:	US		
Inventor four:	William L. Streicher				
Signature: W	llian L Shoch	Citizen of:	US		

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FULL NAME OF INVE	NTOR(S)				
Inventor one:	Jack L. Emerson	\			
Signature:		Citizen of: US			
Inventor two:	Bruno A. Purnode				
Signature:	Burde.	Citizen of: US			
Inventor three:	James P. Tracy				
Signature:		Citizen of: US			
Inventor four:	William L. Streiche:				
Signature:		Citizen of: US			
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to me/us to be materi became available betw	I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and				
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAME OF INVE	NTOR(S)				
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